Patent
Attorney Docket No. 1033630-000003

## I THE ONITED STATES PATENT AND TRADEMARK OFFICE

| In an Detact Application of   | MAIL CTOD AT             | 163 |
|---|--------------------------|-----|
| In re Patent Application of   | MAIL STOP AF             | 10  |
| Maurice Israel et al.   | Group Art Unit: 1649     |     |
| Application No.: 10/049,296   | Examiner: GREGORY S EMCH |     |
| Filing Date: August 6, 2002   | Confirmation No.: 9468   |     |
| Title: PROCESS FOR IDENTIFYING MODULATING COMPOUNDS OF NEUROMEDIATORS |                          |     |

## AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir: Enclosed is a reply for the above-identified patent application.  $\boxtimes$ A Petition for Extension of Time is enclosed. Terminal Disclaimer(s) and the ☐ \$ 65 ☐ \$ 130 fee per Disclaimer due П under 37 C.F.R. § 1.20(d) are enclosed. 冈 Also enclosed is/are: Exhibit A (Declaration by Inventor Under 37 C.F.R. § 1.132) and Exhibit B (Israël et al. reference) attached to Reply. Small entity status is hereby claimed. Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\square\$ \$ 395 \$\sum \$ 790 fee due under 37 C.F.R. \ 1.17(e). Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above. Applicant(s) previously submitted continued examination is requested. Applicant(s) requests suspension of action by the Office until at least , which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) П (1809/2809) is also enclosed.

## Buchanan Ingersoll PC

ATTORNEYS

| $\boxtimes$ | No additional claim fee is required.                                   |
|-------------|--|
|             | An additional claim fee is required, and is calculated as shown below: |

|   |                  | AMENDE   | D CLAIMS        |                 |         |         |
|---|------------------|--|-----------------|-----------------|---------|---------|
|   | No. of<br>Claims | Highest No.<br>of Claims<br>Previously<br>Paid For | Extra<br>Claims | Rate            | Additio | nal Fee |
| Total Claims  | 0                | 20   | 0               | x \$ 50 (1202)  | \$      | 0       |
| Independent Claims  | 0                | 3  | 0               | x \$ 200 (1201) |         | 0       |
| ☐ If Amendment adds multiple dependent claims, add \$ 360 (1203)          |                  |  |                 |                 | \$      | 0       |
| Total Claim Amendment Fee   |                  |  |                 |                 | \$      | 0       |
| ☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee |                  |  |                 |                 |         | 0       |
| TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT                         |                  |  |                 | \$              | 0       |         |

| Charge                    | to Deposit Account No. 02-48  | 00 for the fee due.            |
|---------------------------|---|--------------------------------|
| A check in the amount of  | is enclosed   | for the fee due.               |
| Charge                    | to credit card for the fee due.   | Form PTO-2038 is attached.     |
| 37 C.F.R. §§ 1.16, 1.17 a | thorized to charge any approp<br>nd 1.20(d) and 1.21 that may b<br>t, to Deposit Account No. 02-4 | pe required by this paper, and |

Respectfully submitted,

By:

**BUCHANAN INGERSOLL PC** 

Date <u>June 15, 2006</u>

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